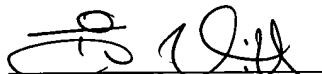


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Thomas P. Vita, Jr.

Date: 5/24/2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.:	10/006,090	Examiner:	T. Noland
Filing Date:	December 6, 2001	Group Art Unit:	2856
Inventor:	Jens Struckmeier et al.	Attorney File:	528.003
For:	<i>Manual Control With Force-Feedback For Probe Microscopy-Based Force Spectroscopy</i>		

Reply after Final

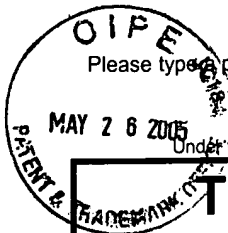
Commissioner for Patents
P.O. Box 1450
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Sir:

In response to the Office Action dated February 24, 2005, the following is presented:

The claims begin on page 2 of this paper.

Remarks begin on page 6 of this paper.



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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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AF/2856
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/006,090	
	Filing Date	12/06/2001	
	First Named Inventor	Struckmeier	
	Group Art Unit	2856	
	Examiner Name	T. Noland	
Total Number of Pages in This Submission		Attorney Docket Number	528.003

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return postcard - Three (3) Declarations
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jay G. Durst Boyle Fredrickson Newholm Stein & Gratz, S.C. 250 East Wisconsin Avenue, Suite 1030 Milwaukee, WI 53202
Signature	
Date	May 24, 2005

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